

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		49	12/22/00
FORMALITY REVIEW	BZ	TC3-883	03-29-01
RESPONSE FORMALITY REVIEW	TAP	110	04-19-01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final	
Original	
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16	
17	
18	
19	✓
20	✓
21	0
22	✓
23	0
24	0
25	✓
26	0
27	✓
28	0
29	0
30	0
31	0
32	0
33	0
34	0
35	0
36	0
37	0
38	0
39	✓
40	✓
41	0
42	0
43	0
44	✓
45	✓
46	0
47	0
48	0
49	0
50	✓

Claim	Date
Final	
Original	
51	0
52	0
53	0
54	0
55	0
56	0
57	0
58	0
59	0
60	0
61	0
62	0
63	✓
64	✓
65	11
66	11
67	11
68	✓
69	✓
70	✓
71	✓
72	11
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Claim	Date
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If more than 150 claims or 10 actions
 staple additional sheet here

4 SET INSIDE